## BEST AVAILABLE COPY SERIAL NO. FILING DATE **CLAIMS ONLY** APPLICANT(S) CLAIMS AFTER 1st AMENDMENT AFTER 2nd AMENDMENT AS FILED MC. JEF. IND. DEP. IND. DEF. IND. DEP. DE?. DEP. IND. MD.

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

TOTAL IND.

TOTAL DEP. TOTAL CLAIMS ı

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